

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17277

FILED
Apr 15, 2006
Secretary of State

Entity Name: MIAMI-ROADS NEIGHBORHOOD CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

228 SW 23 ROAD
MIAMI, FL 33129 US

New Principal Place of Business:

Current Mailing Address:

228 SW 23 ROAD
MIAMI, FL 33129 US

New Mailing Address:

FEI Number: 59-2744056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILKINS, JOSEPH F
228 SW 23 ROAD
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SOLARES, GRACE
Address: 60 SW 30 ROAD
City-St-Zip: MIAMI, FL 33129

Title: P () Delete
Name: FERNANDEZ, VIRGIL
Address: 80 S.W. 17TH ROAD
City-St-Zip: MIAMI, FL 33129

Title: STD () Delete
Name: WILKINS, JOSEPH
Address: 228 SW 23 ROAD
City-St-Zip: MIAMI, FL 33129

Title: T () Delete
Name: KOENIGSBERG, LINDA
Address: 144 SW 19 RD
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SOLARES, GRACE
Address: 60 SW 30 ROAD
City-St-Zip: MIAMI, FL 33129

Title: VP (X) Change () Addition
Name: WILLIG, DAVID
Address: 2837 S.W. 3RD AVENUE
City-St-Zip: MIAMI, FL 33129

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH F. WILKINS

STD

04/15/2006

Electronic Signature of Signing Officer or Director

Date